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UNITED STATES PATENT APPLICATION TRANSMITTAL FORM

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Attention: DO/EO/US

Docket No.: WW064USU

Customer No.: 27623

Dear Sir:

Transmitted herewith for filing is the patent application of

Applicant(s): Markus KLEY, Kai KAMOSSA and Kurt ADLEFF
For: TURBO-COMPOUND SYSTEM
International Application No.: PCT/EP2005/000347
International Filing Date: 14 January 2005

ENTERING OF U.S. NATIONAL STAGE UNDER 35 U.S.C. §371

Transmitted herewith for filing are the following documents submitted under 37 C.F.R. §1.495(b) for the purpose of entering the national stage in the United States of America as an elected office. Enclosed are:

XXXX Specification (14 pps.) consisting of: Description (10 pps.); Claims (3 pps.) and Abstract (1 page);
____ Declaration and Power of Attorney;
XXXX 1 sheet of drawings;
XXXX Preliminary Amendment;
____ An Assignment of the invention to: _____, including \$40.00 recordation fee and recordation cover sheet;
XXXX Information Disclosure Statement with copies of patent(s) (Form - PTO-1449);
____ The undersigned attorney has verified that the applicant is entitled to a Small Entity Status;

10/586223

XXXX Priority of application Serial No. 10 2004 002 215.1, filed on 15 January 2004 in Germany and PCT/EP2005/000347, filed on 14 January 2004 is claimed under 35 U.S.C. §119 and 35 U.S.C. §365;

XXXX Cover page of published PCT Publication No. WO 2005/068801 A1;

XXXX Copy of International Preliminary Examination dated 7 April 2006;

_____ Copy of PCT Demand Under Article 31; and

XXXX Copy of International Search Report dated 15 April 2005

XXXX Copy of Written Opinion.

_____ Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) are transmitted herewith.

The Filing Fee is calculated below.

| CLAIMS AS FILED | | | | |
|--|---------------------|---------------------|-------------|------------------------------|
| (1) For | (2) Number Filed | (3) Number Extra | (4) Rate | (5) Basic Fee \$300.00 |
| Total Claims | 20 - 20 = | 0 | x \$50.00 | \$ |
| Independent Claims | 3 - 3 = | 0 | x \$200.00 | \$ |
| Multiple Dependent Claim Fee | | x \$360.00 = \$0.00 | | |
| SEARCH FEE | | \$500.00 | | |
| EXAMINATION FEE | | \$200.00 | | |
| NATIONAL STAGE APPLICATION SIZE FEE (\$250 FOR EACH ADDITIONAL 50 SHEETS OVER 100 SHEETS) | | \$ | | |
| TOTAL FILING FEE | | \$1000.00 | | |
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XXX Firm's check in the amount of \$1000.00 to cover the filing fee;

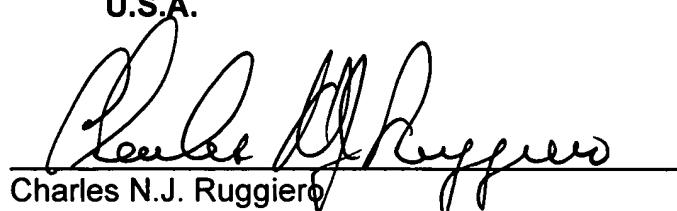
XXX The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required with this communication or during the entire pendency of the application, or credit any overpayment, to Deposit Account No. 01-0467. A duplicate copy of this Form is enclosed.

XXX Postcard.

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